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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* OIC RD)

\*\* FOREIGN APPLICATIONS \*\*\*\*\* OIC RD)

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY GERMANY	SHEETS DRAWING 2	TOTAL CLAIMS 3	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature <u>RD</u> Initials				

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TITLE

Applicator, in particular mascara brush

FILING FEE  RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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